

By: Carona

S.B. No. 632

A BILL TO BE ENTITLED

AN ACT

1  
2 relating to contracts between dentists, optometrists, or  
3 therapeutic optometrists and health maintenance organizations or  
4 insurers.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

6 SECTION 1. Section 843.3115, Insurance Code, is amended to  
7 read as follows:

8 Sec. 843.3115. CONTRACTS WITH DENTISTS, OPTOMETRISTS, OR  
9 THERAPEUTIC OPTOMETRISTS. (a) In this section, "covered product  
10 or service" means a dental care service or vision care product or  
11 service for which reimbursement is available under an enrollee's  
12 health care plan contract, or for which reimbursement is available  
13 subject to a contractual limitation, including:

- 14 (1) a deductible;
- 15 (2) a copayment;
- 16 (3) coinsurance;
- 17 (4) a waiting period;
- 18 (5) an annual or lifetime maximum limit;
- 19 (6) a frequency limitation; or
- 20 (7) an alternative benefit payment.

21 (b) A contract between a health maintenance organization  
22 and a dentist, optometrist, or therapeutic optometrist may not  
23 limit the fee the dentist, optometrist, or therapeutic optometrist  
24 may charge for a product or service that is not a covered product or

1 service.

2 (c) A contract between a health maintenance organization  
3 and a dentist, optometrist, or therapeutic optometrist may not  
4 require a discount on a product or service that is not a covered  
5 product or service.

6 SECTION 2. The heading to Subchapter E, Chapter 1451,  
7 Insurance Code, is amended to read as follows:

8 SUBCHAPTER E. DENTAL AND VISION CARE BENEFITS IN HEALTH INSURANCE  
9 POLICIES OR EMPLOYEE BENEFIT PLANS

10 SECTION 3. Section 1451.201, Insurance Code, is amended by  
11 adding Subdivision (4) to read as follows:

12 (4) "Vision care product or service" means a product  
13 or service provided within the scope of the practice of optometry or  
14 therapeutic optometry under Chapter 351, Occupations Code.

15 SECTION 4. Section 1451.2065, Insurance Code, is amended to  
16 read as follows:

17 Sec. 1451.2065. CONTRACTS WITH DENTISTS, OPTOMETRISTS, OR  
18 THERAPEUTIC OPTOMETRISTS. (a) In this section, "covered product  
19 or service" means a dental care service or vision care product or  
20 service for which reimbursement is available under a patient's  
21 employee benefit plan or health insurance policy, or for which  
22 reimbursement is available subject to a contractual limitation,  
23 including:

- 24 (1) a deductible;
- 25 (2) a copayment;
- 26 (3) coinsurance;
- 27 (4) a waiting period;

1 (5) an annual or lifetime maximum limit;

2 (6) a frequency limitation; or

3 (7) an alternative benefit payment.

4 (b) A contract between an insurer and a dentist,  
5 optometrist, or therapeutic optometrist may not limit the fee the  
6 dentist, optometrist, or therapeutic optometrist may charge for a  
7 product or service that is not a covered product or service.

8 (c) A contract between an insurer and a dentist,  
9 optometrist, or therapeutic optometrist may not require a discount  
10 on a product or service that is not a covered product or service.

11 SECTION 5. The change in law made by this Act applies only  
12 to a contract entered into or renewed on or after January 1, 2014. A  
13 contract entered into or renewed before January 1, 2014, is  
14 governed by the law in effect immediately before the effective date  
15 of this Act, and that law is continued in effect for that purpose.

16 SECTION 6. This Act takes effect September 1, 2013.